

5006

**HUNTON & WILLIAMS**



December 12, 2003

INTELLECTUAL PROPERTY DEPARTMENT  
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File No: 46417.001012

|                    |  |                   |      |
|--------------------|--|-------------------|------|
| Application Number | : 10/014,553   | Confirmation No.: | 6016 |
| Applicant          | : Masud JENABI   |                   |      |
| Filed              | : December 14, 2001  |                   |      |
| Title              | SINGLE KU-BAND MULTI-POLARIZATION GALLIUM ARSENIDE TRANSMIT CHIP |                   |      |
| TC/Art Unit        | : 3662   |                   |      |
| Examiner:          | Gregory C. Issing  |                   |      |
| Docket No.         | 46417.001012   |                   |      |
| Customer No.       | 21967  |                   |      |

**RECEIVED**

DEC 16 2003

**GROUP 3600**

**MAIL STOP PATENT APPLICATION**

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Transmitted herewith is an amendment in the above-identified application. Fees have been calculated as shown below:

| CLAIMS AS AMENDED                               |    |                                  |                                    |       |              |              |                |
|---|----|----------------------------------|------------------------------------|-------|--------------|--------------|----------------|
|   |    | Claims Remaining After Amendment | Highest Number Previously Paid For | Extra | Rate         | Amount       |                |
|   |    |                                  |                                    |       | Large Entity | Small Entity |                |
| Number of Claims in Excess of 20                |    | 22                               | 24                                 |       | \$ 18.00     | \$ 9.00      | \$0.00         |
| Independent Claims in Excess of 3               |    | 4                                | 3                                  | 1     | \$ 86.00     | \$ 43.00     | \$86.00        |
| First Presentation of Multiple Dependent Claims |    |                                  |                                    |       | \$ 290.00    | \$ 145.00    | \$ 0.00        |
| Extension Fee:                                  | a) | One Month                        |                                    |       | \$ 110.00    | \$ 55.00     | \$ 0.00        |
|   | b) | Two Months                       |                                    |       | \$ 420.00    | \$ 210.00    | \$ 0.00        |
|   | c) | Three Months                     |                                    |       | \$ 950.00    | \$ 475.00    | \$ 0.00        |
|   | d) | Four Months                      |                                    |       | \$1480.00    | \$ 740.00    | \$ 0.00        |
|   | e) | Five Months                      |                                    |       | \$2010.00    | \$1005.00    | \$ 0.00        |
| Other:  |    |                                  |                                    |       |              |              | \$ 0.00        |
| <b>TOTAL FEE DUE</b>                            |    |                                  |                                    |       |              |              | <b>\$86.00</b> |

No additional fee is required.

A check in the amount of \$ \_\_\_\_\_ is attached.

Charge \$ 86.00 to Deposit Account No. 50-0206.

Charge any additional fees or credit any overpayment to Deposit Account No. 50-0206.

Small Entity Status Claim:  is hereby requested.  is of record in this application.

02/03/2004 TBENTLE1 00000001 500206 10014553

01 FC:1202 144.00 DA

TDB/cdh

Respectfully submitted,

By:

*Thomas D. Bradshaw*

Thomas D. Bradshaw

Registration No. 51,492